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IT A	CHEDULE A (FEC Form 3)  EMIZED RECEIPTS  Ty Information copied from such Reports and S for commercial purposes, other than using the	Use separate schedule(s) for each category of the Detailed Summary Page attements may not be sold or used by an name and address of any political comm	FOR LINE NUMBER: PAGE 19 OF 181 (check only one)    X   11a
<b>A</b> .	NAME OF COMMITTEE (In Full) Thom Tillis Committee  Full Name (Last, First, Middle Initial) MRS. HELEN DEVOS  Malling Address 126 OTTAWA AVENUE NW SUITE 500  City GRAND RAPIDS  FEC ID number of contributing federal political committee.  Name of Employer HOMEMAKER  Receipt For: 2014 Primary General Other (specify)	State Zip Code MI 49503-2882  C Occupation HOMEMAKER  Election Cycle-to-Date  5200.00	Date of Receipt  M M M / 5 D / 2014  Transaction ID: SA11.16884  Amount of Each Receipt this Period  2600.00  CONTRIBUTION  [MEMO ITEM]  DEBT RETIREMENT - RA/RD REQUESTED - LETTE SENT 9/30/2014
В.	Full Name (Last, First, Middle Initial) MRS. HELEN DEVOS  Mailing Address 126 OTTAWA AVENUE NW SUITE 500  City GRAND RAPIDS  FEC ID number of contributing federal political committee.	State Zip Code MI 49503-2882	Date of Receipt    M # M / D # D / Y # Y # Y # Y # Y # Y # Y # Y # Y # Y

	Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 5200.00	[MEMO ITEM]  RAYRD REQUESTED - LETTER SENT 9/30/2014  REDESIGNATION TO PRIMARY
c.	Full Name (Last, First, Middle Initial) MRS. HELEN DEVOS		Date of Receipt
	Mailing Address 126 OTTAWA AVENUE NW SUITE 500	State Zip Code	11 30 / 2014 Transaction ID : SA11.40057
	GRAND RAPIDS	MI 49503-2882	Transaction ID: SATT.40057
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer HOMEMAKER	Occupation HOMEMAKER	2600.00 CONTRIBUTION
	Receipt For: 2014  Primary General  Other (specify)	Election Cycle-to-Date 5200.00	[MEMO ITEM]  DEBT RETIREMENT - RA/RD REQUESTED - LETTER SENT 9/30/2014 REDESIGNATION FROM GENERAL
	SUBTOTAL of Receipts This Page (optional)	0.00	
L	TOTAL This Period (last page this line number		